

(Print Name of lobbyist)

STATE OF NEW HAMPSHIRE 2018 Statement of Income and Expenses for LOBBYISTS

(RSA Chapter 15)

RECEIVED

APR 2 6 2018

I. Name of Lobbyis	t(s) James P. Monahan ; Susan H. Paschell	DEPARTMENT OF STATE
II. Name of lobbyis	t's partnership, firm or corporation, if any:	
The Dupont Group (Name of partnership, firm		
114 N Main St. Suit	e 401 Concord, NH 03301	
) (Town/City) (State) (Zip Code)	
(603)228-3322 (Telephone)	(603) 228-0713 (Fax)	e-mail jmonahan@dupontgroup.com
III. This statement expense transaction	covers: (Choose one – file separate reports for is which are not attributable to any one client)	
All reportable	transactions occurring in the month prior to the r	eporting date relative to the following client:
Community Behavi	oral Health Association	
OR	(Full Name of Client as it appears on	the Lobbyist Registration Form)
All reportable tra		's family), or the lobbying firm listed below which are unrelated
IV. Date of Report Reports cover	April 25, 2018 X activity from date of registration to 3/31/18	July 25, 2018 activity from 4/1/18 to 6/30/18
	October 31, 2018 activity from 7/1/18 to 9/30/18	January 30, 2019 activity from 10/1/18 to 12/31/18
	no fees received and no reportable transaction, complete just this form and submit it to the Sec	ons made since the last report. retary of State's Office, State House, Room 204, Concord, NH
	onal reports are attached: ved fees or made expenditures, you must file Ad	dendum A- Fees and Expenses
If you have paid Reimbursement	an honorarium or reimbursed expenses, you mus	st file Addendum B- Report of Honorariums or Expense
☐ If you, your firm,	, or your family has made political contributions	, you must file Addendum C- Political Contributions.
I have read RSA 15, best of my knowledg	e and belief.	firm that the foregoing information is true and complete to the
purant. Pase	hell	
(Signature of lobbyist)		4/25/2018 (Date)
Susan H. Paschell		



STATE OF NEW HAMPSHIRE Lobbyist Fees and Expenses Addendum A

(RSA Chapter 15:6

I. Name of Lobbyist(s)	
James P. Monahan ; Susan H. Paschell	
II. Name of lobbyist's partnership, firm or corporation, if any:	
The Dupont Group	
(Name of partnership, firm or corporation)	
III. Name of Client Community Behavioral Health Association	Date 4/25/2018
IV. Fees Received Indicate the gross amount of all fees received from the client identified above to including fees for services such as public advocacy, government relations, or public legislation, and related legal work. The gross fee amount reported shall not be a	ublic relations services including research, monitoring
a) Total of all fees received in this reporting period	a) \$8000
b) Total of all fees received this calendar year, prior to this reporting period (This should equal the total of all prior monthly reports for this calendar year)	b)\$0
c) Total of all fees received to date	
(Add lines a and b)	c)\$8000
d) Indicate the amount of any such fees that are due, but have not yet been paid	d) \$0
V. Expenses: Lobbyist(s)/Lobbying partnerships, firms, or corporations are required to report reports are to be filed for expenditures made relative to each client and if expenditures of expenses of expenses: (a) the aggregate total of all expenses paid during the resolution of the expenses; (b) the aggregate total of all individual expenses where the expenses during a business lunch where the cost was \$25.00 or less, purchase the person being lobbied, purchase of a ceremonial object given to a person being itemized statement of each individual expenditure made during this reporting provered by (a) (for example: purchase of a meal with value of greater than \$25, subject of lobbying with a value greater than \$25, but not greater than \$50, rest for honorariums, expense reimbursement, or political contributions will be reported by Addendum A.	ditures are made by the lobbyist(s)/firm that are m. Expenses are to be reported in one of three eporting period for salaries, benefits, support staff, and conditure was of \$25.00 or less (for example: meals of a pen with a value of less than \$10 that is given to an lobbied with a value of \$25.00 or less); and (c) an eriod of greater than \$25.00 for any purpose not purchase of a ceremonial object to be given to the aurant expenses for a legislative reception). Expenses
a) Total aggregate expenses for this reporting period for salaries, benefits, support staff, and office expenses, related directly or indirectly to lobbying.	a) \$

b) Total aggregate of expenditures during this reporting period , not reported in a), of $$25$ or less.	b) \$	
c) Total of all itemized expenditures reported in detail in section VI.	c) \$	
d) Total expenses for this reporting period (Add lines a, b and c)	d) \$	
e) Total of expenses paid this calendar year, prior to this reporting period (This should be the amount on line f of addendum A for last month's report)	e) \$	
f) Total of all expenses year to date	f) \$	
VI. Other Expenses: Provide the following detail for all expenditures of more than \$25 made from whom paid or to whom charged.	a lobbying fees during this reporting period, including by	
Paid to: Amount:	\$	
	S	
(A) 是是一种"	\$	
	\$	
	\$	
	\$	
Sworn Statement/Affirmation by Lobbyist I have read RSA 15, RSA 15-B and RSA 664 and hereby swear or affirm that best of my knowledge and belief.		
puraw H. farchell 4/25	4/25/2018	
(Signature of lobbyist) (Date	(Date)	
Susan H. Paschell		
(Print Name of lobbyist)		

State of New Hampshire Signature Form for Associated Lobbyist RSA Chapter 15

Use this form to swear or affirm the truth and completeness of Income and Expense Statements and related Addendums.

Sworn Statement/Affirmation by Lobbyist Statement of Income and Expenses for:	
Name of Lobbying partnership, firm, or corpor	ation: The Dupont Group
Name of Client (leave blank if Statement is for	the partnership, firm, or corporation and not related to any particular
client): Community Behavioral Health Asso	ciation
Date of Report (check one):	
April 25, 2018 X July 25, 2018	October 31, 2018
	Statement of Income and Expenses described above, and the ement (insert the number of Addendum forms being submitted):
Addendum A(s).	
0 Addendum B(s).	
<u>0</u> Addendum C(s).	
the best of my knowledge and belief.	ormation on the Statement and each Addendum is true and complete to
Jr The	
(Signature of lobbyist)	4/25/2018 (Date)
James P. Monahan	
(Print Name of lobbyist)	